The Adjutant General Directorate

"People Always … Mission First"

Traumatic Servicemembers' Group Life Insurance (TSGLI)

UNCLASSIFIED

Traumatic Servicemembers' Group Life Insurance (TSGLI)

- What is TSGLI?
  - Insurance benefit attached to Servicemembers' Group Life Insurance (SGLI) coverage for Soldiers who suffer a qualifying loss due to a traumatic injury
  - TSGLI helps injured Soldiers and their Families
  - Provides tax-free payment(s) between $25,0000 and $100,000 per traumatic event
  - Is available to Soldiers from all components—Active, Reserve, or National Guard and members of all branches of Service

TSGLI Eligibility—Circumstances

Two Different Programs

RETROACTIVE Related to combat zones	PROSPECTIVE Anytime and Anywhere
7 October 2001 – 30 November 2005	1 December 2005 – forward
✓ Qualifying traumatic injury must occur while on orders in a Combat Zone ✓ Soldier does not have to be currently serving in Army ✓ SGLI coverage not necessary	✓ Qualifying traumatic injury can occur under any circumstances—doesn't have to be combat-related ✓ Traumatic injury does NOT have to occur while on orders ✓ Soldier must have SGLI coverage

Pending legislation: Senate Bill 1315 passed on 24 April 2008 and is in review by the House. It would eliminate the retroactive CZ, offering "anytime, anywhere" coverage for all Soldiers with qualifying injuries back to 7 October 2001

Qualifying Traumatic Injuries/Physical Losses

Definition: A Soldier who sustains one of 44 qualifying physical losses caused by external force or violence

	Qualifying injuries (losses)	As a result of (event examples)
Physical Losses #1-43	Amputation (limb or entire finger with thumb)	**Improvised Explosive Device**
	Loss of Sight, Speech or Hearing (see program defined guidance)	**Civilian Car Accident**
	Paralysis (quadriplegia, paraplegia, hemiplegic)	**Training Accident**
	Brain Injury or Coma (Glasgow Coma score of eight or less)	**Vehicle Borne Improvised Explosive Device**
	Burns (30% full thickness of face or body)	**Motorcycle Accident**
ADL Losses #37 & #44	Other traumatic injuries resulting in loss of Activities of Daily Living (ADLs). **UNABLE TO INDEPENDENTLY PERFORM** at least two of six ADLs for specified periods of time.	**Small Arms**
		Rocket Propelled Grenade
		Civilian Aircraft Accident

*New program guidance will be issued in FY 2009 which will result in an expansion of the current losses and increase the awards

Activities of Daily Living (ADLs) Loss Descriptions

Unable to independently perform two or more…

Eating	…feed oneself, relying on a tube to receive nourishment
Bathing	…clean oneself without assistance (can't bathe independently)
Dressing	…put on shoes and socks (for example)
Toileting	…relieve bladder/bowel or perform associated hygiene
Transferring	…get in and out of bed or chair
Continence	…manage and control bowel and bladder function

"TNT – Time and Type of ADL Loss

Traumatic Brain Injury (TBI): The Soldier must have ADL loss in increments of . . .	**Other Traumatic Injuries (OTI): The Soldier must have ADL loss in increments of . . .**
15 days	**30 days**
30 days	**60 days**
60 days	**90 days**
90 days	**120 days**

- **There must be no break in the period of ADL loss, otherwise the clock re-starts**
- **Cannot combine OTI ADLs with other traumatic losses**
- **TBI and coma, however, *can* be combined with other traumatic losses**

Claims for ADL Loss

For ADL loss to be covered…

- Soldier must be unable to independently perform
  - ADLs - at least two of six ADLs

- ADL loss from Other Traumatic Injuries (OTI)
  - must be at least 30 days

- ADL loss from Traumatic Brain Injury (TBI)
  - must be at least 15 days

  (loss must be physical in cause)

Claims for ADL Loss

For ADL loss to be covered. . .

- ADL loss ***must*** be certified by a healthcare practitioner (Claim Form Part B)
- ADL loss ***must*** be substantiated by medical documentation:
  - OT/PT reports, discharge summaries, etc.
  - Documentation must specify "TNT" (Type and Time)

    Type: Type of ADLs impacted

    Time: Duration of "inability to independently perform" (i.e., number of days)
  - Medical Consultation Statements (TNT)

IMPORTANT: Information in medical documentation must corroborate the healthcare providers information stated in Part B

Time Constraints

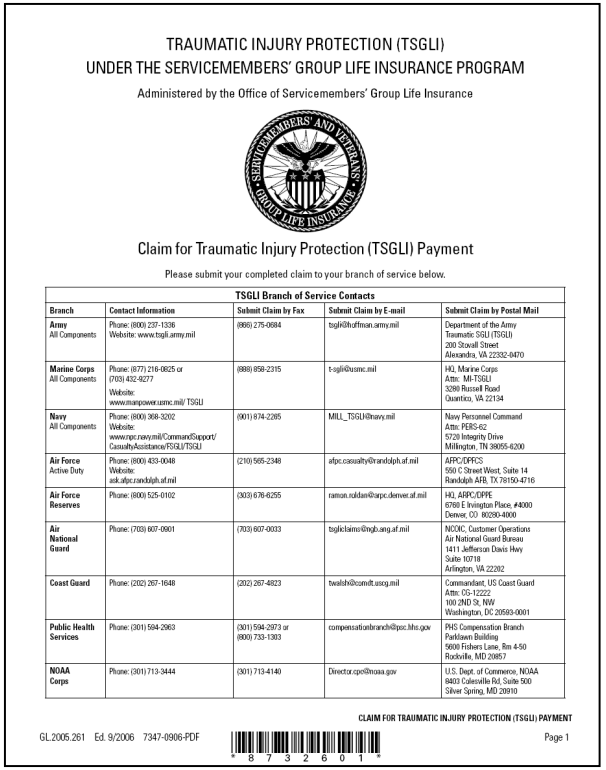
- Qualifying loss must have occurred within 730 days of event
- Multiple events within seven days count as one event
- Events more than seven days apart are considered additional events
- Deceased must have survived for seven days and must have sustained a qualifying physical injury

When Is A Soldier Not Covered?

- A mental or physical illness or disease; unless the illness or disease is caused by:
  - A pyogenic (pus forming, often from a wound) infection, biological, chemical or radiological weapon
  - Accidental ingestion of a contaminated substance
- Self-inflicted wounds
- Attempted suicide
- Received an injury while under the influence of an illegal substance
- Received an injury while committing or attempting to commit a felony
- Received an injury due to medical, surgical treatment, or procedure
- Soldier elected not to participate in SGLI after 1 December 2005

3-PART Claim Form

- Part A - Soldier
- Part B – Licensed Medical Practitioner
- Part C – AHRC ONLY



TRAUMATIC INJURY PROTECTION (TSGLI)
UNDER THE SERVICEMEMBERS' GROUP LIFE INSURANCE PROGRAM

Administered by the Office of Servicemembers' Group Life Insurance

Claim for Traumatic Injury Protection (TSGLI) Payment

Please submit your completed claim to your branch of service below.

TSGLI Branch of Service Contacts

Branch	Contact Information	Submit Claim by Fax	Submit Claim by E-mail	Submit Claim by Postal Mail
Army All Components	Phone: (800) 237-1336 Website: www.tsgli.army.mil	(866) 275-0684	tsgli@hoffman.army.mil	Department of the Army Traumatic SGLI (TSGLI) 200 Stovall Street Alexandria, VA 22332-0470
Marine Corps All Components	Phone: (877) 216-0825 or (703) 432-9277 Website: www.manpower.usmc.mil/ TSGLI	(888) 858-2315	t-sgli@usmc.mil	HQ, Marine Corps Attn: MI-TSGLI 3280 Russell Road Quantico, VA 22134
Navy All Components	Phone: (800) 368-3202 Website: www.npc.navy.mil/CommandSupport/ CasualtyAssistance/FSGLI/TSGLI	(901) 874-2265	MILL_TSGLI@navy.mil	Navy Personnel Command Attn: PERS-62 5720 Integrity Drive Millington, TN 38055-6200
Air Force Active Duty	Phone: (800) 433-0048 Website: ask.afpc.randolph.af.mil	(210) 565-2348	afpc.casualty@randolph.af.mil	AFPC/DPFCS 550 C Street West, Suite 14 Randolph AFB, TX 78150-4716
Air Force Reserves	Phone: (800) 525-0102	(303) 676-6255	ramon.roldan@arpc.denver.af.mil	HQ, ARPC/DPPE 6760 E Irvington Place, #4000 Denver, CO 80280-4000
Air National Guard	Phone: (703) 607-0901	(703) 607-0033	tsglicliams@ngb.ang.af.mil	NGNC, Customer Operations Air National Guard Bureau 1411 Jefferson Davis Hwy Suite 10718 Arlington, VA 22202
Coast Guard	Phone: (202) 267-1648	(202) 267-4823	twalsh@comdt.uscg.mil	Commandant, US Coast Guard Attn: CG-12222 100 2ND St, NW Washington, DC 20593-0001
Public Health Services	Phone: (301) 594-2963	(301) 594-2973 or (800) 733-1303	compensationbranch@psc.hhs.gov	PHS Compensation Branch Parklawn Building 5600 Fishers Lane, Rm 4-50 Rockville, MD 20857
NOAA Corps	Phone: (301) 713-3444	(301) 713-4140	Director.cpo@noaa.gov	U.S. Dept. of Commerce, NOAA 8403 Colesville Rd, Suite 500 Silver Spring, MD 20910

CLAIM FOR TRAUMATIC INJURY PROTECTION (TSGLI) PAYMENT

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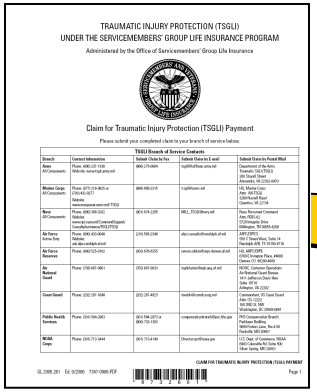
The Adjutant General Directorate

TSGLI HELPING HEROES IN TIMES OF NEED

"People Always … Mission First"

Claim Form
Part A - Soldier


TRAUMATIC INJURY PROTECTION (TSGLI)
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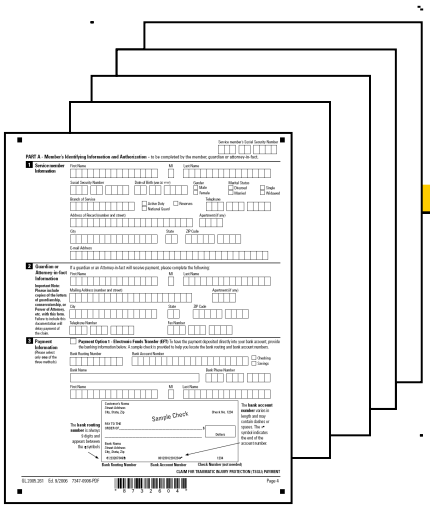
Filled out by Soldier or Advocate


PART A - Member's Identifying Information and Authorization – to be completed by the member, guardian or attorney-in-fact.

PART A – Member's Identifying Information
Section 1 – Servicemember Information
Section 2 – Guardian and Attorney-in-fact Information
Section 3 – Payment Information
Section 4 – Signature
Section 5 – Authorization to Speak to Third Party
Section 6 – Authorization to Release Information

TSGLI Payout Methods

Pay to the Order of

Prudential Financial

☑ **Electronic Funds Transfer**

☑ **Prudential Alliance Account**

☑ **Check**

****Free financial counseling is available from Financial Point Corporation** call toll free: 1-888-243-7351**

TSGLI HELPING HEROES IN TIMES OF NEED

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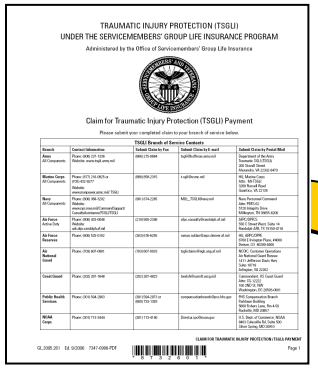
Claim Form
Part B – Licensed Medical Provider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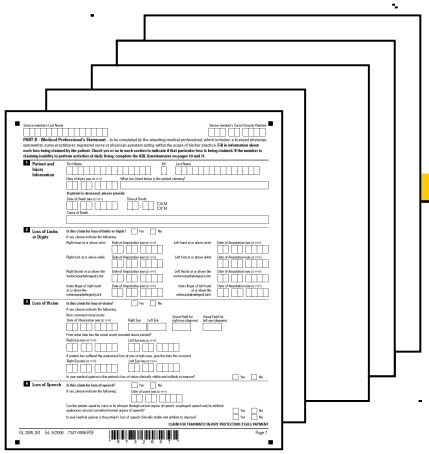


MUST be completed by a licensed medical provider— **does not** necessarily have to be a physician

PART B – Licensed Medical Provider's Statement
Section 1 – Patient and Injury Information
Sections 2 – 10 Losses Suffered by Patient
Section 11 – Medical Professional's Comments
Section 12 – Contact Information
Section 13 – Medical Professional's Signature
Two-page ADL Questionnaire

Who Completes Part B?

- **Licensed medical practitioner gives certifying statements:**
  - Physicians
  - Physician Assistants
  - Nurse Practitioners
  - Registered Nurses

- **Other medical practitioners give documentation statements within their lane of expertise:**
  - Registered Dieticians
  - Neurologists
  - Ophthalmologists
  - Audiologists
  - Speech/Language Pathologists
  - Occupational/Physical Therapists
  - Social Workers
  - Dentists
  - Other licensed medical providers within his/her scope of practice

Part B- ADL Questionnaire Sample Response

Service member's Last Name: SMITH

Service member's Social Security Number: 123 45 6789

Activities of Daily Living (ADL) Questionnaire

To the Medical Professional: If the patient's claim is for traumatic brain injury or other traumatic injuries not listed on the form, please complete this questionnaire to document the patient's inability to perform activities of daily living as a result of his/her injury. **NOTE:** Medical Professionals cannot certify in advance of loss (e.g. a future date for end date).

Please check one of the following…	And follow the appropriate instructions
[X] I have observed the patient's inability to perform daily activities.	Please complete the following questions and attach copies of medical records that support this claim.
[ ] I have not observed the patient's inability to perform daily activities but I have reviewed the patient's medical records.	

Is this claim for inability to Bathe? [X] Yes [ ] No If yes, please indicate the following

1. Is/Was the patient completely dependent upon another person including…
   a. taking a sponge bath [X] Yes [ ] No
   b. taking a tub bath [X] Yes [ ] No
   c. taking a shower [ ] Yes [ ] No
2. Is/Was the patient able to use accommodating equipment or adaptive behavior to get into and out of the tub/shower? [ ] Yes [X] No
3. Is/Was the patient able to get into and out of a specially accomodating tub/shower? [ ] Yes [X] No
4. Describe the specific physical limitations and how these limitations prevent the patient from performing this activity.
5. When did the patient's inability to perform this activity begin and end?
   Begin Date (MM DD YYYY): 04 07 2006
   End Date (if applicable) (MM DD YYYY): 07 01 2006
   Check here if inability is ongoing [ ]

A licensed medical practitioner must indicate a Soldier's inability to perform an ADL and the duration of time they cannot perform that ADL by checking appropriate boxes and dates, as shown on this example

Note - Medical Practitioner's signature must not be earlier than the end date of ADL

ADL Questionnaire: What You Need To Know

- An ADL Questionnaire must be completed, and certified by a treating, licensed medical practitioner (not a Nurse Case Worker) to document a Soldier's condition by indicating:
  - Two or more ADLs (Type)
  - Time frame affected
  - How Soldier was unable to independently perform ADLs*

*If a Soldier is able to use adaptive behavior or equipment to perform ADLs, they are considered capable of independently performing their ADLs (this does not include bedpans, colostomy bags and catheters)

Documents Commonly Used To Support Types of "Specific Losses"

Loss 37 & 44 – ADLs

- Occupational/Physical Therapy Report (ADL Documentation)
- Neurological Reports (TBI/ADL Documentation)
- Nurses Notes (ADL Documentation)
- Glasgow Coma Score

Loss 1 to 43 –Other Physical Injuries

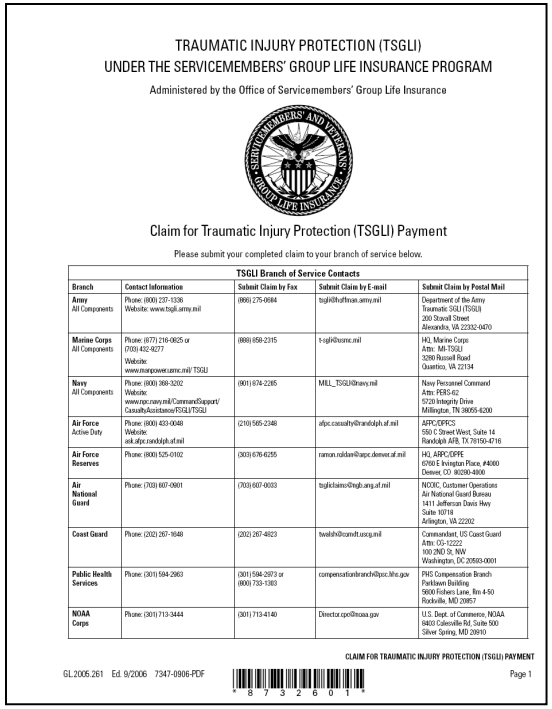
- Patient Discharge Summaries
- OR Report (amputation)
- Hearing Test Results (for hearing loss)
- Eye Test Results (for sight loss)
- Speech Test Results (for speech loss)
- Burn Estimate Charts
- Medical Summary and/or History
- Patient Movement Request
- Radiographic Reports (X-Ray, MRI, Ultrasound, etc.)
- Accident Report
- Line of Duty (LOD)
- Medical/Physical Evaluation Board (MEB/PEB)
- Other diagnostic test results (e.g., lab reports, etc.)
- Other pertinent documents demonstrating time duration of ADL loss and type of injury

Send TSGLI Claim Form Part A & B

Soldier or licensed medical provider submits claim forms ensuring that critical supporting documents substantiating certification are included

Priority Submission Methods:

1. **E-Fax 1-866-275-0684**
2. **tsgli@conus.army.mil**
3. **Army Human Resources Command**
   ATTN: AHRC-PDP-V
   200 Stovall Street
   Alexandria, VA 22332-0470



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Marine Corps All Components	Phone: (877) 216-0825 or (703) 432-9277 Website: www.manpower.usmc.mil/ TSGLI	(888) 859-2315	t-sgli@usmc.mil	HQ, Marine Corps Attn: MI-TSGLI 3280 Russell Road Quantico, VA 22134
Navy All Components	Phone: (800) 368-3202 Website: www.npc.navy.mil/CommandSupport/ CasualtyAssistance/TSGLI/TSGLI	(901) 874-2285	MILL_TSGLI@navy.mil	Navy Personnel Command Attn: PERS-62 5720 Integrity Drive Millington, TN 38055-6200
Air Force Active Duty	Phone: (800) 433-0048 Website: ask.afpc.randolph.af.mil	(210) 565-2348	afpc.casualty@randolph.af.mil	AFPC/DPFCS 550 C Street West, Suite 14 Randolph AFB, TX 78150-4716
Air Force Reserves	Phone: (800) 525-0102	(303) 676-6255	ramon.roldan@arpc.denver.af.mil	HQ, ARPC/DPFE 6760 E Irvington Place, #4000 Denver, CO 80280-4000
Air National Guard	Phone: (703) 607-0001	(703) 607-0003	tsglictaimo@ngb.ang.af.mil	NCOIC, Customer Operations Air National Guard Bureau 1411 Jefferson Davis Hwy Suite 10718 Arlington, VA 22202
Coast Guard	Phone: (202) 267-1648	(202) 267-4823	twalsh@comdt.uscg.mil	Commandant, US Coast Guard Attn: OS-1222 100 2ND St. NW Washington, DC 20593-0001
Public Health Services	Phone: (301) 594-2983	(301) 594-2973 or (800) 733-1383	compensationbranch@psc.hhs.gov	PHS Compensation Branch Parklawn Building 5600 Fishers Lane, Rm 4-50 Rockville, MD 20857
NOAA Corps	Phone: (301) 713-3444	(301) 713-4140	Director.cpo@noaa.gov	U.S. Dept. of Commerce, NOAA 8403 Colesville Rd, Suite 500 Silver Spring, MD 20910

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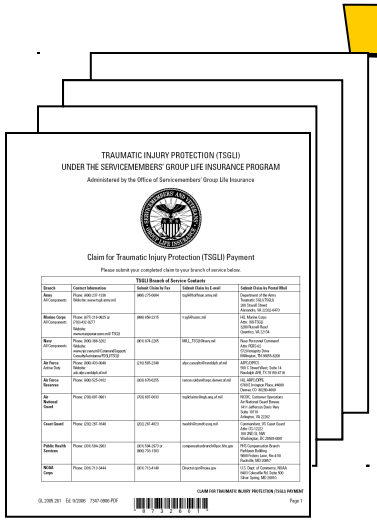
The Adjutant General Directorate

TSGLI HELPING HEROES IN TIMES OF NEED

"People Always … Mission First"

Claim Form
Part C – Human Resources Command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Claim for Traumatic Injury Protection (TSGLI) Payment

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Branch	Contact Information	Submit Claim by Fax	Submit Claim by E-mail	Submit Claim by Postal Mail
Army All Components	Phone: (888) 331-7336 Website: www.myarmyhr.army.mil	(866) 215-6004	tsgli@hrhaz.army.mil	Department of the Army Headquarters, U.S. Army Human Resources Command (HRC) 200 Stovall Street Alexandria, VA 22332-0413
Marine Corps All Components	Phone: (877) 216-9625 or (703) 432-9271 Website: www.manpower.usmc.mil/TSGLI	(866) 856-3135	tsgli@usmc.mil	Headquarters, U.S. Marine Corps Attn: TSGLI Claim 3280 Russell Road Quantico, VA 22134
Navy All Components	Phone: (866) 366-5262 Website: www.npc.navy.mil/CommandSupport/CasualtyAssistance/TSGLI/	(901) 874-2265	NMCI_TSGLI@navy.mil	Navy Personnel Command Attn: PERS-62 5720 Integrity Drive Millington, TN 38055-6200
Air Force Active Duty	Phone: (800) 433-0046 Website: afpc.dpw.randolph.af.mil	(210) 565-2340	afpc.casualty@randolph.af.mil	AFPC/DPWCC 550 C Street West, Suite 19 Randolph AFB, TX 78150-4719
Air Force Reserves	Phone: (800) 525-0102	(303) 676-6235	ranpc.tsgli@hqrpc.dusaa.af.mil	HQ, ARPC/DPK 6760 E. Irvington Place, #4400 Denver, CO 80280-4400
Air National Guard	Phone: (703) 607-2861	(703) 607-0003	tsgli@ustreas1@ngb.army.af.mil	NGB/, Customer Operations Air National Guard Bureau 1411 Jefferson Davis Hwy Suite 11300 Arlington, VA 22202
Coast Guard	Phone: (202) 267-1048	(202) 267-4823	tsgli@uscg.mil	Commandant, (CG-1331) U.S. Coast Guard 2100 2ND ST, SW Washington, DC 20593-0001
Public Health Services	Phone: (301) 594-2363	(301) 594-2973 or (800) 765-1303	compensation.branch@psc.hhs.gov	PHS Compensation Branch Parklawn Building 5600 Fishers Lane, Rm 8-58 Rockville, MD 20857
NOAA Corps	Phone: (301) 713-3444	(301) 713-4140	Director.tsgli@noaa.gov	1315 Dept. of Commerce, NOAA 10833 Columbia Pk. Suite 100 Silver Spring, MD 20993

CLAIM FOR TRAUMATIC INJURY PROTECTION (TSGLI) PAYMENT

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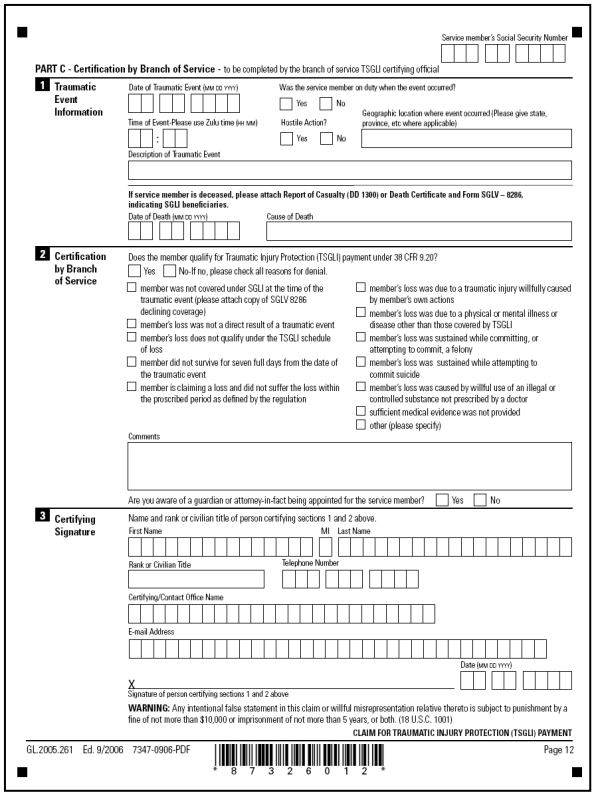
Service member's Social Security Number

PART C - Certification by Branch of Service - to be completed by the branch of service TSGLI certifying official

1 Traumatic Event Information

Date of Traumatic Event (MM DD YYYY)

Was the service member on duty when the event occurred? ☐ Yes ☐ No

Time of Event-Please use Zulu time (HH MM)

Hostile Action? ☐ Yes ☐ No

Geographic location where event occurred (Please give state, province, etc where applicable)

Description of Traumatic Event

If service member is deceased, please attach Report of Casualty (DD 1300) or Death Certificate and Form SGLV – 8286, indicating SGLI beneficiaries.

Date of Death (MM DD YYYY)

Cause of Death

2 Certification by Branch of Service

Does the member qualify for Traumatic Injury Protection (TSGLI) payment under 38 CFR 9.20? ☐ Yes ☐ No-If no, please check all reasons for denial.

- ☐ member was not covered under SGLI at the time of the traumatic event (please attach copy of SGLV 8286 declining coverage)
- ☐ member's loss was not a direct result of a traumatic event
- ☐ member's loss does not qualify under the TSGLI schedule of loss
- ☐ member did not survive for seven full days from the date of the traumatic event
- ☐ member is claiming a loss and did not suffer the loss within the proscribed period as defined by the regulation
- ☐ member's loss was due to a traumatic injury willfully caused by member's own actions
- ☐ member's loss was due to a physical or mental illness or disease other than those covered by TSGLI
- ☐ member's loss was sustained while committing, or attempting to commit, a felony
- ☐ member's loss was sustained while attempting to commit suicide
- ☐ member's loss was caused by willful use of an illegal or controlled substance not prescribed by a doctor
- ☐ sufficient medical evidence was not provided
- ☐ other (please specify)

Comments

Are you aware of a guardian or attorney-in-fact being appointed for the service member? ☐ Yes ☐ No

3 Certifying Signature

Name and rank or civilian title of person certifying sections 1 and 2 above.

First Name MI Last Name

Rank or Civilian Title

Telephone Number

Certifying/Contact Office Name

E-mail Address

Date (MM DD YYYY)

X

Signature of person certifying sections 1 and 2 above

WARNING: Any intentional false statement in this claim or willful misrepresentation relative thereto is subject to punishment by a fine of not more than $10,000 or imprisonment of not more than 5 years, or both. (18 U.S.C. 1001)

CLAIM FOR TRAUMATIC INJURY PROTECTION (TSGLI) PAYMENT

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Do NOT complete this form—
TSGLI will complete it

Branch of Service Validates Info in Parts A&B and Completing Part C to Certify Claim

Office of Servicemember's Group Life Insurance (OSGLI) receives Certified Claim

Multiple Claims, Reconsiderations and Appeals

- **Multiple Claim Submissions Are Possible for:**
  - Consecutive periods of ADL loss (up to 120 days)
  - Additional traumatic event(s) beyond seven days
  - Multiple injuries DO NOT require multiple claim forms

- **Reconsiderations and Appeals**
  - If a Soldier feels that their claim has been wrongly denied, there are three levels of appeal. The process is as follows:

    1) Reconsideration - The Soldier must gather additional supporting documentation and submit for a reconsideration

    2) Army Appeals Board - If the claim is still denied, the Soldier must supply additional medical documents and submit the appeal to the U.S. Army TSGLI Appeals Board

    3) ARBA Appeals Board - The third level of the appeal process requires submission to the U.S. Army Review Board Agency (ARBA)

TSGLI—Summary

- A Soldier must have at least one of the 44 scheduled physical losses

- The loss must be caused by external force or violence
  - PTSD is not covered by TSGLI (cognitive vs physical)

- Medical documentation must substantiate the "Types of ADLs" and the "Time" they were "unable to independently perform"

- Every case is different, even if caused by the same event
  - Every Soldier's treatment is different
  - Circumstances, injury specifics and documentation vary

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Soldier Family Support Specialists

- TSGLI created the role of Soldier Family Support Specialists (SFSSs) at 10 selected medical centers to assist Soldiers and Families starting the claim process

- It has been demonstrated that direct support to servicemembers and their Families reduces ineligibles and denials, and increases approvals

- Responsibilities include:
  - Program education to medical personnel, leadership and claimants
  - Claimant advocacy
  - Claim processing assistance
  - Medical documentation assistance
  - Payment advisory/counseling
  - Guidance on ADLs
  - Address Soldier, Family concerns – channel to appropriate program authorities
  - Provide HRC benefit and resource referrals

Benefit Program Related to TSGLI

Combat-Related Special Compensation (CRSC)

COMBAT-RELATED SPECIAL COMPENSATION

Because You – the Veteran – Earned It

Combat-Related Special Compensation (CRSC)

- What is CRSC?
  - Program recognizing sacrifice of eligible military retirees
  - Replaces VA-disability compensation subtracted from retired pay
  - Provides monthly, tax-free payments based on Service pay and
    VA disability rating
  - Available to retirees from all components—Active, Reserve, or National Guard and members of all Branches of Service

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Who Is Eligible for CRSC?

Must Have *ALL Four*

AND

At Least One

1. AC, RC, NG with Retirees:
   20-Years Srvc
   Chapter 61 Medical*
   Temporary Disability Retired List (TDRL)*
   Temporary Early Retirement Act (TERA)**
2. 10% or greater VA rated injury that is combat-related
3. Receiving military retired pay
4. Military retired pay is reduced by VA disability payments (VA Waiver)

1. Simulating War (SW)
2. Hazardous Service (HS)
3. Instrumentality of War (IN)
4. Armed Conflict (AC)

Note: Includes VA presumptive injuries

*Medical Chapter 61 and TDRL retirees with one to 19 years are eligible for CRSC

**TERA retirees with 15-19 years are eligible for CRSC

What is *Service Related vs. Combat Related*

- Service-Related Injuries

  Example:

  - Hurt ***knee*** during Battalion run at Airborne School
  - Directly related to military service

- Combat-Related Injuries

  Examples:

  - Simulating War - hurt ***knee*** while reacting to OPFOR fire during FTX
  - Hazardous Services - hurt ***knee*** on a day or night jump
  - Instrumentality of War - hit ***knee*** on rotating tank turret during FTX
  - Armed Conflict - shot in ***knee*** by enemy during time of war

Two Forms of Concurrent Receipt

A Decision Matrix	CRSC *Benefit*	CRDP *Pay*
Full Concurrent Receipt	Yes	No – 10 yr phase in (except 100% ratings)
VA Rating Starts At	10%	50%
Federal Tax	Tax Free	Taxed
File Claims	Must Apply	Automatic
Retroactive Pay	Yes	No
Qualified Injury	Combat Linked	Service Connected
Subject to Uniform Services Former Spouse Protection Act (USFSPA)	No	Yes
SBP (Survivor Benefit Plan) 1 October 1972	No	Yes
Available to Chapter 61 Medical and TDRL retirees with less than 20 years of service	Yes	No

Notes

a. If receiving Combat Retirement Disability Pay (CRDP) payments will be subtracted from CRSC payments

b. Claimants with 60-90% awarded Individually Unemployable (IU) receive 100% VA which is retroactive to 1 January 2005 and payable after 1 January 2008 (CRDP); CRSC receives 100% IU since 2005

c. A retiree cannot receive both CRSC and CRDP concurrently

d. If a retiree is eligible for both programs they will be given the opportunity to elect which program they will receive

e. A retiree may switch between programs during an annual "Open Season" between December and January

f. CRDP may qualify for SBP if SBP coverage is elected at time of retirement

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